

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
Russ for Wisconsin

Full Name (Last, First, Middle Initial) Gary Weiss, MD			Date of Receipt 06/30/2015
Mailing Address 1051 Port Malabar Blvd NE Ste 6			Transaction Id: VPFNME8NM12
City Palm Bay	State FL	Zip Code 32905-5153	Amount of Each Receipt this Period \$2,700.00
FEC ID number of contributing federal political committee.			[MEMO ITEM]
Name of Employer Self-Employed		Occupation Neurologist	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$5,400.00	

Full Name (Last, First, Middle Initial) Gary Weiss, MD			Date of Receipt 06/30/2015
Mailing Address 1051 Port Malabar Blvd NE Ste 6			Transaction Id: VPFNME8NM20
City Palm Bay	State FL	Zip Code 32905-5153	Amount of Each Receipt this Period \$2,700.00
FEC ID number of contributing federal political committee.			[MEMO ITEM]
Name of Employer Self-Employed		Occupation Neurologist	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$5,400.00	

Full Name (Last, First, Middle Initial) Mary B Weiss			Date of Receipt 06/30/2015
Mailing Address PO Box 3300			Transaction Id: VPFNME8NKZ6
City Eagle	State CO	Zip Code 81631-3300	Amount of Each Receipt this Period \$2,700.00
FEC ID number of contributing federal political committee.			[MEMO ITEM]
Name of Employer Homemaker		Occupation Homemaker	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$5,400.00	

SUBTOTAL of Receipts This Page (optional)	\$0.00
TOTAL This Period (last page this line number only)	

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